



Please place a plus sign (+) inside this box →

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM		Application Number	10/762,664
		Filing Date	01/22/2004
		First Named Inventor	David J. Beebe et al.
		Group Art Unit	1744
		Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission		Attorney Docket Number	282.033

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO Form 1449 Return Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Peter C. Stomma Boyle Fredrickson Newholm Stein & Gratz 250 E. Wisconsin Avenue, Suite 1030 Milwaukee, WI 53202
Signature	
Date	5/6/04

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

5-6-04

Type or printed name	Christine Kierzek
Signature	
Date	5-6-04

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Application of:

DAVID J. BEEBE ET AL.

Serial No.: 10/762,664

Filed: January 22, 2004

Examiner:

Art Unit: 1744

MICROFLUIDIC DEVICE FOR DRUG
DELIVERYCERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-14501 on

5-6-04Christine Kierzek

Christine Kierzek
Signature Date

INFORMATION DISCLOSURE STATEMENT

Mail Stop
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-01450

Sir:

This Information Disclosure Statement is being submitted under the provision of 37 CFR §§ 1.56 and 1.97(b)(3).

Applicants make no assertion regarding the materiality of the documents noted in the attached Form PTO-1449. Applicants therefore request that these documents be considered during the examination of the application.

This Information Disclosure Statement is submitted prior to the mailing of the first office action on the merits under § 1.97(b)(3) and, therefore, no fee is due at this time. However, the Commissioner is hereby authorized to charge payment of any additional fee(s) associated with this or any other communication or credit any overpayment to Deposit Account No. 50-1170, if necessary.

Respectfully submitted,

Peter C. Stomma, Reg. No. 36,020

Dated: 5/6/04
 BOYLE, FREDRICKSON, NEWHOLM, STEIN & GRATZ, S.C.
 250 Plaza, Suite 1030
 250 East Wisconsin Avenue
 Milwaukee, WI 53202
 Telephone: (414) 225-9755
 Docket No.: 282.033

O P E J C 188
MAY 10 2004

LIST OF PATENTS AND PUBLICATIONS FOR APPLICANT'S
INFORMATION DISCLOSURE STATEMENT
(Use several sheets if necessary)

Atty. Docket No.:

282.033

Serial No.:

10/762,664

Applicant: David J. Beebe et al.

Filing Date: 01/22/04

Group: 1743

REFEREN~~E~~ DESIGNATION

U.S. PATENT DOCUMENTS

Examiner Initial		Document Number	Date	Name	Class	Subclass	Filing Date If Appropriate
	AA	6,268,161	07/31/2001	Han et al.	435	14	
	AB	6,475,750	11/05/2002	Han et al.	435	14	
	AC	6,485,461	11/26/2002	Mason et al.	604	132	
	AD	US2002/0063060 A1	05/30/2002	Gascoyne et al.	204	471	
	AE	US2002/0117517 A1	08/29/2002	Unger et al.	222	214	
	AF	US2002/0193729 A1	12/19/2002	Cormier et al.	604	46	
	AG	6,514,689 B2	02/04/2003	Han et al.	435	4	
	AH						
	AJ						
	AK						
	AL						
	AM						
	AN						
	AO						
	AP						
	AQ						
	AR						
	AS						
	AT						

FOREIGN PATENT DOCUMENTS

		Document Number	Date	Country	Class	Subclass	Translation
							Yes
	AU						No

OTHER ART (Including Author, Title, Date, Pertinent Pages, Etc.)

AV

EXAMINER

DATE CONSIDERED

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.